



## MATERNAL AND CHILD NUTRITION AND HEALTH

### WHAT IS THE PUBLIC HEALTH ISSUE?

CDC promotes optimal nutrition for pregnant women and young children throughout the United States and abroad. While major improvements in nutritional status were made in the 20<sup>th</sup> century, significant problems still exist. Despite a gradual decline in pediatric anemia during the past decade, 13% of low-income children are anemic, and rates of anemia are greater than 30% among low-income groups in some areas, putting these children at increased risk of developmental delays and impaired cognitive ability. During pregnancy, anemia continues to be problematic, especially among low-income women—33% are anemic, greatly increasing their risk of having pre-term and low birth-weight babies. Inadequate weight gain during pregnancy also contributes to the chances for unhealthy births; 26% of low-income women do not gain enough weight during their pregnancies. About one third of U.S. newborns are never breast-fed, and less than half of these continue for 6 months, putting them at increased risk for diarrhea, ear infections, pneumonia, type 1 diabetes, celiac disease, and childhood overweight. In addition, more than 13% of low-income children are overweight.

### WHAT HAS CDC ACCOMPLISHED?

CDC has developed and implemented Web-based training modules on the new CDC pediatric growth charts, which healthcare providers use to evaluate and monitor the weight status of over 82 million infants, children, and adolescents. CDC helped develop the “HHS Blueprint for Action on Breast-feeding” and has supported efforts to promote breast-feeding in the healthcare system, workplace, and community as outlined in the blueprint. CDC also funded two studies of iron supplementation during pregnancy among low-income women. Results of both studies provide evidence that iron supplementation of all pregnant women reduces early deliveries and improves birth weight.

#### *Example of Program in Action*

CDC collaborated with the Mississippi Department of Health to evaluate a breast-feeding peer counseling program that had been implemented gradually in about half of the state’s WIC clinics. The proportion of mothers who breast-fed increased eight percentage points in the clinics where the peer counseling was implemented, but only rose one and a half percentage point in clinics without peer counseling. The peer counseling program subsequently was implemented statewide and has served as a model for similar programs around the country.

### WHAT ARE THE NEXT STEPS?

CDC continues to facilitate implementation of activities addressed in the “HHS Blueprint for Action on Breast-feeding.” Efforts include collaborating with the U.S. Department Agriculture to help states develop strategies to establish breast-feeding-friendly communities and conduct qualitative research on infant feeding behaviors among African-American women. CDC also funds a range of breast-feeding evaluation projects to help determine the most effective and cost-beneficial interventions. CDC is conducting two etiologic studies to investigate the pockets of high rates of anemia among low-income children. To build on research related to iron supplementation during pregnancy, CDC funds a study in China to evaluate the impact of iron and other mineral and vitamin supplements given during pregnancy. CDC conducts a pilot research project on pediatric overweight through the American Academy of Pediatrics and other partners. CDC has expanded its comprehensive nutrition and physical activity program to prevent overweight among young children by providing funding to 20 states.

*For additional information on this or other CDC programs, visit [www.cdc.gov/program](http://www.cdc.gov/program)*

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